



**STATE OF MAINE**  
**DEPARTMENT OF PUBLIC SAFETY GAMING & WEAPONS SECTION**

164 STATE HOUSE STATION, AUGUSTA, MAINE 04333-0164  
(207) 624-7210

**Application for a License to Operate Beano/Bingo or a Game of Chance**

1. License you are requesting is for: **BEANO** ☐ **OR** **GAMES OF CHANCE** ☐  
(PLEASE CHECK ONE)

2. Organization Name is: \_\_\_\_\_

Beano/Games Organization Number is: \_\_\_\_\_

IF YOU CHECKED GAMES OF CHANCE:

Name of Game: \_\_\_\_\_

Number of Games: \_\_\_\_\_

Open to Public? Yes ☐ No ☐

Business Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ Phone: \_\_\_\_\_

3. Date of Founding \_\_\_\_\_ Place of Founding \_\_\_\_\_

4. Current Officers:

NAME & TITLE	ADDRESS	CITY/ZIP	PHONE	DATE TERM EXPIRES
NAME & TITLE	ADDRESS	CITY/ZIP	PHONE	DATE TERM EXPIRES
NAME & TITLE	ADDRESS	CITY/ZIP	PHONE	DATE TERM EXPIRES
NAME & TITLE	ADDRESS	CITY/ZIP	PHONE	DATE TERM EXPIRES

5. Location of Beano/Bingo or Game of Chance:

BUILDING	ADDRESS	CITY
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6. Person responsible for operation of Beano/Bingo or Games of Chance:

Name: \_\_\_\_\_

DAYTIME PHONE & EVENING PHONE

Name & Address where

Licenses will be sent: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

7. Circle the days of the week you expect to operate: Mon Tue Wed Thu Fri Sat Sun

8. For Beano/Bingo Only: How many times per month do you plan to run Beano/Bingo? \_\_\_\_\_

What time do doors open for Beano/Bingo? \_\_\_\_\_

9. Dates to be licensed – Please specify weeks (Monday through Sunday) or full months. You may apply for up to six months of licenses in advance. See back of this form for yearly rates.

_____	_____	_____
_____	_____	_____

Complete this application – both front & back. Sign, date, and return it to the Gaming & Weapons Section at the address shown above.

**FOR OFFICE USE ONLY**

Check # \_\_\_\_\_

Amount \$ \_\_\_\_\_

10. Does the organization own all the equipment used in operating this amusement? Yes ☐ No ☐  
If "NO", please explain the circumstances under which the equipment is to be used: \_\_\_\_\_
11. Has any current officer of this organization or association ever been convicted of violating the gambling or lottery laws of the United States or of the State of Maine? Yes ☐ No ☐  
If "YES", give name and address of the person and the date and place of conviction: \_\_\_\_\_

12. If the Applicant is a Fair Association, attach a list of the names and home addresses of the persons operating or assisting in the licensed activity. **Please write your organization name and number on the list.**

-----**APPLICANT SIGNATURE**-----

13. The applicant agrees to obey the laws of the State of Maine and of the United States. The applicant agrees to obey the rules and regulations governing Beano/Bingo or Game of Chance promulgated by the Chief of the State Police. The applicant warrants the truth of the foregoing statements on penalty of perjury.

Signed: \_\_\_\_\_

Name: \_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_\_\_

(Please print – must be duly authorized officer of this organization – title is required)

The Licensing Unit must receive this application at least eight days prior to first day on which you plan to conduct Beano/Bingo or a Game of Chance.

-----**BLANKET LETTER**-----

14. The following consent must be completed by the municipal officers of the city or town where the Beano/Bingo or Game of Chance will take place unless a separate "Blanket Letter of Approval" is filed with the Chief of the State Police.

- ☐ Check here if you have previously filed a "Blanket Letter of Approval" with us, which is still valid  
☐ Check here if you have attached a "Blanket Letter of Approval".

-----**CONSENT**-----

The undersigned being municipal officers of the (City)(Town) of \_\_\_\_\_ hereby certify that we consent to this application for a license to operate Beano/Bingo or a Game of Chance in accordance with the provisions of 17 M.R.S.A. Chapter 13-A (Beano) or Chapter 62 (Games of Chance) and in accordance with the Rules and Regulations promulgated by the Chief of the State Police governing the operating of Beano/Bingo or Games of Chance.

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Name: \_\_\_\_\_ Date: \_\_\_\_\_

-----**FEES**-----

Beano - \$12.00/Week or \$36.00/Month or \$400.00/Year Games - \$15.00/Week or \$60.00/Month or \$700/Year

Video Poker - \$15.00/Week or \$60.00/Month Card / Cribbage - \$30.00 Per Calendar Year

Tournament Game (up to 100 players) – \$150.00/Per Tournament or \$250.00/Month (Two Tournaments) or \$3,000.00/Year (Two Tournaments per Month)

Make check payable to Treasurer, State of Maine